Inder the Paperwork R	aduction Act of 199	ons are required	RECORD	lection of information unless it displays a valid OrtiB control number. CORD Application of Docket Number.					
PATEN	E DETERA x Form PTO-8				OUHERA	100			
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL EN	ITITY C	OR D	SMALL EN	ITITY
NUMBER FILED		NUMBER EXTRA		RATE	ree	}-	RATE	FEE	
FOR NUMBER FILES			l			s	OR		10.
OFAL CLAIMS	R 1.16(a))			x s=		OR	x s=	XV	
7 CFR 1.16(c)) IDEPENDENT CLAIMS minus 3 =					x s=		OR	x s=	2-
(37 CFR 1.16(b))					+ \$=		OR	+ \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) If the difference in column 1 is less than zero, enter '0' in column 2.					TOTAL		OŘ	TOTAL	
				/		•			
CLAIMS AS AMENDED = PART !!					SMALL E	:NTITY	OR	OTHER SMALL E	THAN NTITY
	(Column 1) CLAIMS		(Column 2) HIGHEST NUMBER	(Column 3) PRESENT	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
∀	REMAINING AFTER AMENDMENT	P	REVIOUSLY PAID FOR	EXTRA		FEE	-	x \$=	FEE
Total (37 CFR 1,16(cl))	. //	Minus	20		x s=		OR	x s =	
Total (37 CFR 1.76(ci)) Independent (37 CFR 1.76(bi)) FIRST PRESENTA	2	Minus	3		x s=	 	OR		
FIRST PRESENTATION OF MULTIPLE DEPENDENT QLAIM (37 CFR 1.16(d))					+5=		OR	TOTAL	
/	0-25	- /:			TOTAL ADD'L FEE		OR	ADD'L FEE	
ω '	(Column 1) CLARAS REMARRING		(Column 2) HIGHEST HUMBER	PRESENT EXTRA	RATE	ADDI-		RATE	ADDI- TIONAL FEE
	AFTER AMENDMENT		PREVIOUSLY ROP CIAN	=		FEL	OR	x \$=	
Total (37 CFR 1 16(cl) Z Independent (37 CFR 1.16(b))	·	Minus		+=	X \	1	OR	x s=	
Z Independent (37 CFR 1,16(b))				J	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1	OR	+ \$ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
						L			
	(Column 1)	τ	(Column 2) HIGHEST	(Column 3)	7	ADDI-		RATE	ADDI-
O	CLAIMS REMAINING AFTER		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		TIONAL FEE			FEE
Total	AMENDMENT	Minus	- PAID FOR	=	x s	-	OR		
(37 CFR 1.16(c)) Z Independent (37 CFR 1.16(b))	 	Minus	•••	=	x s	<u> </u>	OR		
₩ STORESE	NTATION OF MULTIP	LE DEPEND	DENT CLAIM (37	CFR 1.16(d))		=	OR	TOTAL	-
FIRST PRESE					TOTAL ADD'L FE	εl	OR		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

** If the "Highest I imber Previously Paid For IN THIS SPACE is less than 3, enter "3".

** It is collection of information is required by 37 CFR 1.1b. The information is required to obtain or retain a benefit by the public which is to fair the following selection of information is required by 37 CFR 1.1b. The information is required to obtain or retain a benefit by the public which is to fair the following of the public which is confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patern on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.